



## PART B - FEE(S) TRANSMITTAL

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25541 7590 10/28/2004

NEAL, GERBER, & EISENBERG  
SUITE 2200  
2 NORTH LASALLE STREET  
CHICAGO, IL 60602

11/22/2004 MAHMEDE 00000103 502261 10723463

01 FC:1501 1370.00 DA  
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<i>Lisa Lyle</i>	(Depositor's name)
<i>Lisa Lyle</i>	(Signature)
11/19/04	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10723,463	11/26/2003	Eric S. Phanco	36400.32US2	7651

TITLE OF INVENTION: FILTER FOR HYDROSTATIC TRANSMISSION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370	\$0	\$1370	01/28/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
KERSHTEYN, IGOR	3745	060-454000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Neal, Gerber &amp; Eisenberg, LLP

2 \_\_\_\_\_  
 3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Hydro-Gear Limited Partnership

Sullivan, Illinois

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☐ Publication Fee (No small entity discount permitted)  
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- ☐ A check in the amount of the fee(s) is enclosed.  
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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 502,261 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

*Thomas C. McDonough*

Date

Nov. 19, 2004

Typed or printed name

Thomas C. McDonough

Registration No.

33,734

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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11/19/2004 14:01 FAX 312 269 1742

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**FACSIMILE TRANSMISSION**

**NUMBER OF PAGES WITH COVER PAGE: 2**

**DATE:** November 19, 2004 **TIME:** 1:50 PM **C/M No.:** 036400.0801  
**FROM:** Thomas C. McDonough **PHONE:** (312) 269-5282 **FAX:** (312) 269-1747  
**RE:** Issue Fee Transmittal for Serial No. 10/723,463; Our Docket No. 36400.32US2

**To:**

NAME:	FAX No.:	PHONE No.:
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